## PART B - FEE(S) TRANSMITTAL

## Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FFF ADDRESS" for

maintenance fee notifica	itions.	in Block 1, by (		<u> </u>				
CURRENT CORRESPOND	Fe	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
26574	26574 7590 10/30/2008							
SCHIFF HAR	1	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile						
PATENT DEPA	,		Si	ates Postal Service v	vith suf	ficient postage for first	st class mail in an envelo	ope
6600 SEARS TO	ac tr	Idressed to the Mai	l Stop TO (57	ISSUE FEE address 1) 273-2885, on the d	above, or being facsim	ile		
CHICAGO, IL			Г	ansimited to the OSI	10 (57	7) 273 2003, Off the d	(Depositor's man	ne)
							(Signatu	re)
							(Da	de)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	)R	АТТО	RNEY DOCKET NO.	CONFIRMATION NO.	
10/535,543 10/23/2006			Markus Stahuber	er P05,0081		P05,0081	9231	
TITLE OF INVENTION	I: DEVICE AND METH	OD FOR CHARGING A	MEDIA TRANSPORT	BELT CONVEYOR	IN A P	RINTER OR COPIEI	t.	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUI	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$0		01/30/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS					
NGO, HOANG X		2852	399-303000					
1. Change of corresponde	ence address or indication	n of "Fee Address" (37	<ol><li>For printing on the</li></ol>	patent front page, li	st	C-h:ff	Handin IID	_
CFR 1.363).	andanca address (or Cha	nge of Correspondence	(1) the names of up or agents OR, alterna	to 3 registered pater	t attorn	eys 1 SCHILL	Hardin LLP	
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.								
"Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	ication (or "Fee Address' 2 or more recent) attach	Indication form ed. Use of a Customer	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON T	THE PATENT (print or t	ype)				_
PLEASE NOTE: Unl	ess an assignee is identi	ified below, no assignee bletion of this form is NO.	data will appear on the	patent. If an assign	ee is id	entified below, the do	ocument has been filed	for
(A) NAME OF ASSIG	-	netion of this form is NO	(B) RESIDENCE: (CIT	=				
OCE PRINTI	NG SYSTEMS GMI	ВН	POING, GE	RMANY				
Please check the appropri	iate assignee category or	categories (will not be pri	inted on the patent):	☐ Individual	rporati	on or other private gra	oup entity	ent
4a. The following fee(s) a			. Payment of Fee(s): (Plo					
Issue Fee	ire subilitied.					lously paid issue fee s	mown above)	
Issue Fee								
Advance Order - #		The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).						
5. Change in Entity Stat	us (from status indicated	l above)		***·***				_
11	SMALL ENTITY statu		b. Applicant is no lo					
NOTE: The Issue Fee and nterest as shown by the r	d Publication Fee (if requeecords of the United Stat	nired) will not be accepted les Patent and Trademark	I from anyone other than Office.	the applicant; a regi	stered a	ttorney or agent; or th	e assignee or other party	in
Authorized Signature	Prut	9 Vally		Date Jan	uary	16, 2009		
Typed or printed name	Brett A. Va		Registration No. 27841					
This collection of information application. Confident ubmitting the completed his form and/or suggestic	ation is required by 37 Cliality is governed by 35 application form to the ons for reducing this burn	FR 1.311. The information U.S.C. 122 and 37 CFR 1 USPTO. Time will vary den. should be sent to the	n is required to obtain or 1.14. This collection is edepending upon the indi- Chief Information Office	retain a benefit by the stimated to take 12 revidual case. Any coper 11 S. Patent and	ne publi ninutes mments Tradem	to complete, including on the amount of tin	by the USPTO to proces g gathering, preparing, a ne you require to comple attent of Commerce. P	ss) nd

this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Fatent and Tragemark Office, U.S. Department of Commisco, F.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.